

Fact Sheet:

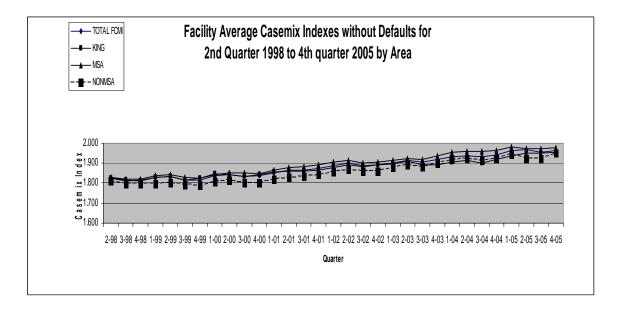
Debility Level of Nursing Home Residents

Background

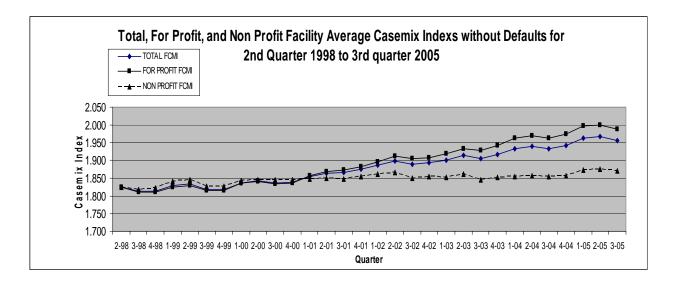
Shorter hospital stays and the state's emphasis on alternative placements for lower needs residents suggests that, as the industry contends, the average debility level of nursing home residents has increased in recent years.

Are trends in debility levels associated with facility location, type or size?

The state incorporated case mix, a measure of debility, in its Medicaid payment methodology beginning in October 1998. While some of the recorded increase may be due to the nursing home's initial lack of familiarity with the process of documenting debility, the following charts do suggest a moderate rise in actual debility over the past five years.



The above chart shows a rise in debility, as measured by the case mix index used to set Medicaid rates, for all geographic areas of the state. Note that facilities located in non-metropolitan statistical areas, i.e. non-MSA, show an almost identical trend although consistently serving residents having a slightly lower level of needs.

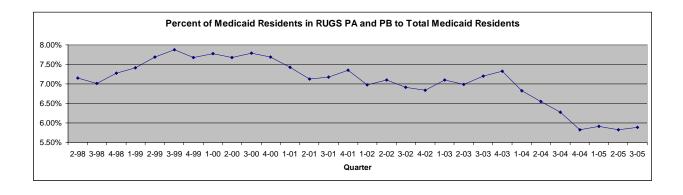


The above chart indicates that non-profit facilities were initially serving the highest needs residents. However, with very little increase in debility over the six year period, the non-profit facilities have been surpassed by the for-profit facilities in terms of average resident debility level.

A further review of existing data shows no significant difference in debility level by facility size.

Is the percent of lower needs residents declining?

Within the 44 level of need classifications used in the Medicaid payment rate methodology, the two lowest need levels, designated "PA" and "PB" include residents that have the greatest potential for placement in alternative community settings.



Although the above chart indicates significant variability, the trend does show a slight decrease in the percentage of Medicaid residents that are included in these two categories. This further suggests that both the average debility level is increasing and lower need level individuals are increasingly being placed in home and community settings.